			plication or Docket Number									
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  RCA 40 14 2												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20					RATE	FEE	] [	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			∂ 0 minus 20=		* 0	• 0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			₩ minus 3 =		1	1		X40=		OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM PF	RESENT					+135=		OR	+270= .	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										1	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL		OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	= = 1114	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	JLTIPLE DEPENDENT			Ī	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)							(001). 1 22			NOD: ==.	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=	t	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT OF				CLAIM		ŀ	+135=		Un		
										OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO	HEST MBER OUSLY FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N Q M	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	;
ME	Independent	*	Minus	***		=	t	X40=		OR	X80=	<u> </u>
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		ŀ					
۱.	If the party in poly	4 in less than f	to cotto in colu	O writ	- "O" in co	diama 3	L	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OF											TOTAL ADDIT. FEE	
	The "Highest Nun	mber Previously Pai	id For" (Total o	r Independ	lent) is the	highest number	four	nd in the app	propriate box	x in col	lumn 1.	